

09/831202

ISSUB SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SA	68966 4/2	6-13-61

INDEX OF CLAIMS

✓ ----- Rejected
 - ----- Allowed
 (Through numeral) ... Canceled
 + ----- Restricted
 N ----- Non-elected
 I ----- Interference
 A ----- Appeal
 O ----- Objected

Claim	Date
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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